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MAR 12 2003

TO:	Examiner H. Pham U. S. Patent & Trademark Office Group Art Unit 2861	TECHNOLOGY CENTER 2800
FROM:	Andrew D. Mickelsen, Reg. No. 50,957	
RE:	U.S. Application No. 09/964,658 Atty. Docket No.: 03500.015836	
FAX NO.:	(703) 872-9318	
DATE:	March 12, 2003	NO. OF PAGES: 34 <small>(including cover page)</small>
TIME:	SENT BY:	

MESSAGE

Attachments:

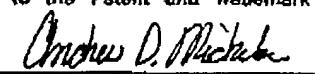
- 1) Amendment Transmittal
- 2) Amendment

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B

In re Application of:

HIROKI YOSHIDA

Application No.: 09/964,658

Filed: September 28, 2001

For: MULTI-BEAM SCANNING OPTICAL
APPARATUS AND IMAGE FORMING
APPARATUS USING THE SAMECommissioner for Patents
Washington, D.C. 20231

Docket No.

03500.015836

Examiner: H. Pham

Group Art Unit: 2861

Date: March 12, 2003

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CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 77	MINUS	** 163	= 0	x \$9 \$18	\$ 0
INDEP. CLAIMS	* 8	MINUS	*** 8	= 0	x \$42 \$84	\$ 0
Fee for Multiple Dependent claims \$140°/\$280						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT--						\$ 0

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

 °Verified Statement claiming small entity status is enclosed, if not filed previously. A check in the amount of \$____ is enclosed.

Page 1 of 2

B

Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

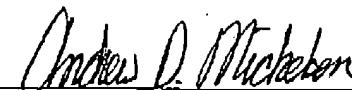
Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.

A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.

A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

Applicant's undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Attorney for Applicant

Registration No. 50,957

FITZPATRICK, CELLA, HARPER & SCINTO
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New York, New York 10112-3801
Facsimile: (212) 218-2200

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CA_MAIN 59958 v 1

Roberts~

03500.015836

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
 HIROKI YOSHIDA) Examiner: H. Pham
 Application No.: 09/964,658) Group Art Unit: 2861
 Filed: September 28, 2001)
 For: MULTI-BEAM SCANNING) March 12, 2003
 OPTICAL APPARATUS AND)
 IMAGE FORMING APPARATUS)
 USING THE SAME)

Commissioner for Patents
 Washington, D.C. 20231

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AMENDMENT

Sir:

In response to the Office Action dated December 12, 2002, please amend
 the above-identified application, as follows:

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on 3/12/03

Date

Andrew D. Miklos
 Signature

ANDREW D. MIKLOSKY
 Name of person signing certificate

¹This Amendment has been prepared in the revised amendment format set forth in the Pre-OG
 Notice entitled "Amendments in a Revised Format Now Permitted."

B